

U.S. DEPARTMENT OF AGRICULTURE FOOD SAFETY AND INSPECTION SERVICE INTERNATIONAL PROGRAMS		REVIEW DATE 11-12-00		ESTABLISHMENT NO. AND NAME Est. 22, Godi hf		CITY Hvammstangi	
FOREIGN PLANT REVIEW FORM						COUNTRY Iceland	
NAME OF REVIEWER Dr. Hussain Magsi		NAME OF FOREIGN OFFICIAL Dr. S.O. Hansson		EVALUATION <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Acceptable/ Re-review <input type="checkbox"/> Unacceptable			
CODES (Give an appropriate code for each review item listed below) A = Acceptable M = Marginally Acceptable U = Unacceptable N = Not Reviewed O = Does not apply							
1. CONTAMINATION CONTROL		Cross contamination prevention		28 A	Formulations		55 O
(a) BASIC ESTABLISHMENT FACILITIES		Equipment Sanitizing		29 A	Packaging materials		56 A
Water potability records	01 A	Product handling and storage		30 U	Laboratory confirmation		57 A
Chlorination procedures	02 A	Product reconditioning		31 A	Label approvals		58 O
Back siphonage prevention	03 A	Product transportation		32 A	Special label claims		59 O
Hand washing facilities	04 A	(d) ESTABLISHMENT SANITATION PROGRAM			Inspector monitoring		60 O
Sanitizers	05 A	Effective maintenance program		33 A	Processing schedules		61 O
Establishments separation	06 A	Preoperational sanitation		34 A	Processing equipment		62 O
Pest --no evidence	07 A	Operational sanitation		35 A	Processing records		63 O
Pest control program	08 A	Waste disposal		36 A	Empty can inspection		64 O
Pest control monitoring	09 A	2. DISEASE CONTROL			Filling procedures		65 O
Temperature control	10 A	Animal identification		37 A	Container closure exam		66 O
Lighting	11 A	Antemortem inspec. procedures		38 A	Interim container handling		67 O
Operations work space	12 A	Antemortem dispositions		39 A	Post-processing handling		68 O
Inspector work space	13 A	Humane Slaughter		40 A	Incubation procedures		69 O
Ventilation	14 A	Postmortem inspec. procedures		41 A	Process. defect actions -- plant		70 O
Facilities approval	15 A	Postmortem dispositions		42 A	Processing control -- inspection		71 O
Equipment approval	16 A	Condemned product control		43 A	5. COMPLIANCE/ECON. FRAUD CONTROL		
(b) CONDITION OF FACILITIES EQUIPMENT		Restricted product control		44 A	Export product identification		72 A
Over-product ceilings	17 A	Returned and rework product		45 A	Inspector verification		73 A
Over-product equipment	18 A	3. RESIDUE CONTROL			Export certificates		74 A
Product contact equipment	19 A	Residue program compliance		46 A	Single standard		75 A
Other product areas (inside)	20 A	Sampling procedures		47 A	Inspection supervision		76 A
Dry storage areas	21 A	Residue reporting procedures		48 A	Control of security items		77 A
Antemortem facilities	22 A	Approval of chemicals, etc.		49 A	Shipment security		78 A
Welfare facilities	23 A	Storage and use of chemicals		50 A	Species verification		79 A
Outside premises	24 A	4. PROCESSED PRODUCT CONTROL			"Equal to" status		80 A
(c) PRODUCT PROTECTION & HANDLING		Pre-boning trim		51 A	Imports		81 O
Personal dress and habits	25 A	Boneless meat reinspection		52 A			
Personal hygiene practices	26 A	Ingredients identification		53 O			
Sanitary dressing procedures	27 A	Control of restricted ingredients		54 O			

FOREIGN PLANT REVIEW FORM (reverse)	REVIEW DATE 11-12-00	ESTABLISHMENT NO. AND NAME Est. 22, Godi hf	CITY Hvammstangi
	COUNTRY Iceland		
NAME OF REVIEWER Dr. Hussain Magsi	NAME OF FOREIGN OFFICIAL Dr. S.O. Hansson		EVALUATION <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Acceptable/ Re-review <input type="checkbox"/> Unacceptable

COMMENTS:

30. FROZEN PRODUCT STORED IN CONTACT WITH FLOORS, CEILINGS AND/OR WALLS. INSPECTION SERVIEC TOOK CORRECTIVE ACTION.

U.S. DEPARTMENT OF AGRICULTURE FOOD SAFETY AND INSPECTION SERVICE INTERNATIONAL PROGRAMS		REVIEW DATE 10-13-00	ESTABLISHMENT NO. AND NAME EST. 23, Solufelag A	CITY Hunventinga	
FOREIGN PLANT REVIEW FORM				COUNTRY Iceland	
NAME OF REVIEWER Dr. H. Magsi		NAME OF FOREIGN OFFICIAL Dr. S.O.Hansson		EVALUATION <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Acceptable/Re-review <input type="checkbox"/> Unacceptable	
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COMMENTS:

30. FROZEN PRODUCT STORED IN CONTACT WITH FLOORS, CEILINGS, AND/OR WALLS. INSPECTION SERVICE INITIATED IMMEDIATE CORRECTIVE ACTION.

51. INADEQUATE PRE-TRIM OF CARCASSES. INSPECTION SERVICE WITHHELD ALL PRODUCT, AND INITIATED REINSPECTION AND CORRECTIVE ACTION.

U.S. DEPARTMENT OF AGRICULTURE FOOD SAFETY AND INSPECTION SERVICE INTERNATIONAL PROGRAMS		REVIEW DATE 10-11-00	ESTABLISHMENT NO. AND NAME EST. 31, Norolenska	CITY HUSAVIK
FOREIGN PLANT REVIEW FORM				COUNTRY ICELAND
NAME OF REVIEWER Dr. H. Magsi		NAME OF FOREIGN OFFICIAL Dr. H. Runolfsson		EVALUATION <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Acceptable/Re-review <input type="checkbox"/> Unacceptable
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FOREIGN PLANT REVIEW FORM				COUNTRY ICELAND	
NAME OF REVIEWER Dr. H. Magsi		NAME OF FOREIGN OFFICIAL Dr. S.O. Hansson		EVALUATION <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Acceptable/Re-review <input type="checkbox"/> Unacceptable	
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U.S. DEPARTMENT OF AGRICULTURE FOOD SAFETY AND INSPECTION SERVICE INTERNATIONAL PROGRAMS		REVIEW DATE 10-16-00	ESTABLISHMENT NO. AND NAME EST. 81, Slaturfelag Souvourland	CITY Selfoss
FOREIGN PLANT REVIEW FORM				COUNTRY Iceland
NAME OF REVIEWER Dr. H. Magsi		NAME OF FOREIGN OFFICIAL Drs. S.O. Hansson, and Katrin Andress'r		EVALUATION <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Acceptable/ Re-review <input type="checkbox"/> Unacceptable
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